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[Page 1 of 2]

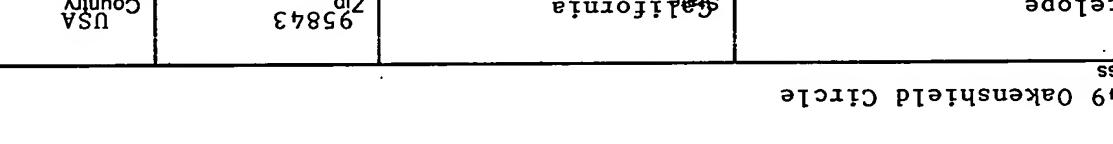
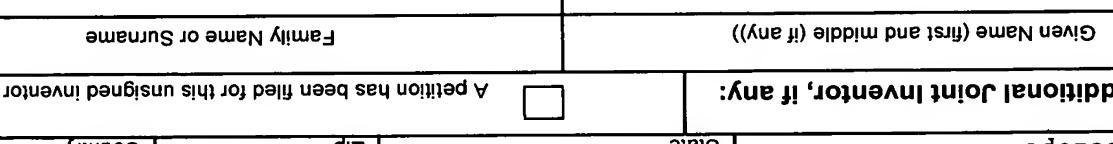
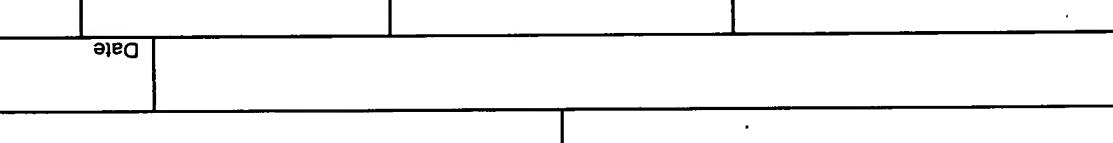
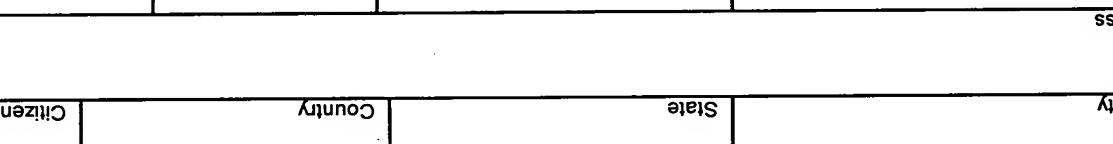
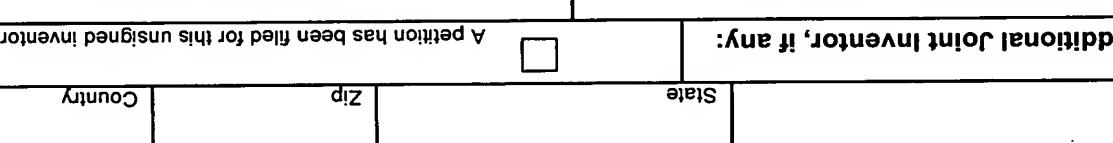
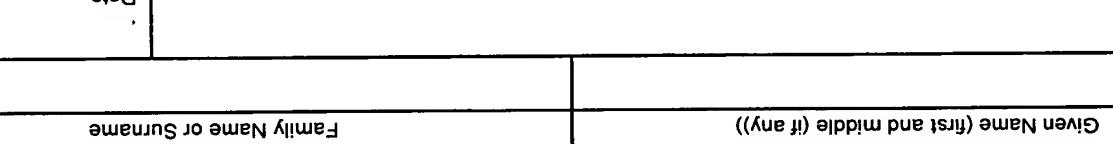
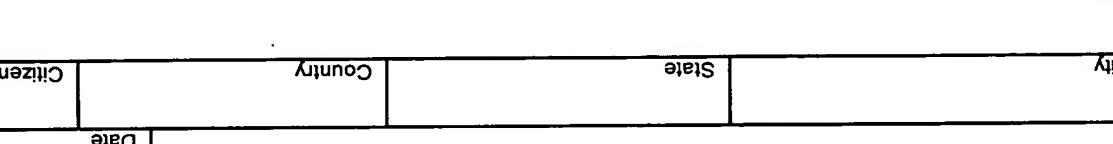
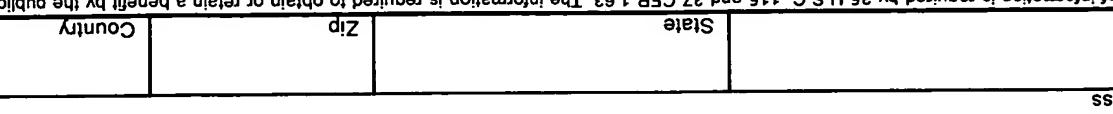
Additional foreign application numbers are listed on a supplemental priority data sheet FTO/SB/02B attached hereto. <input type="checkbox"/>				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, invention or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designates at least one country other than the United States of America, listed below and also have a filing date of the prior application before the application for patent, inventor's, plant breeder's rights certificate(s), or any PCT international application having the same priority date as the application for patent, inventor's, plant breeder's rights certificate(s), or 365(a) of any foreign application(s) for patent, invention or plant breeder's rights certificate(s), or 365(b) of any foreign application-in-part application.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
I hereby declare that the invention for which a patent is sought on the invention entitled:				
(Title of the Invention)				
Modelled Multi-Table Game Apparatus and Method				
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for each inventor's residence, mailing address, and citizenship are as stated below next to their name.				
I hereby declare that:				
<input checked="" type="checkbox"/> was filed on (MM/DD/YYYY) 06/23/2005 as United States Application Number or PCT International Application Number US2005/022075 and was amended on (MM/DD/YYYY) <input type="text"/> (if applicable).				
OR				
<input type="checkbox"/> is attached hereto				
the specification of which				
was filed on (MM/DD/YYYY) <input type="text"/>				

Designation or Declaration	With Initials	Submittal After Initial	Filing Surcharge (\$7 CFR 1.16 (e))	Examiner Name
Number				
Attorney Document Number				
First Named Inventor				
COMPLETENESS IF KNOWN				
First Named Inventor Kent D. Pearson				
(37 CFR 1.63)				
PATENT APPLICATION				
DECLARATION FOR UTILITY OR DESIGN				

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 PTO/SB/01 (10-95)

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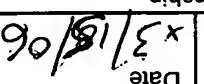
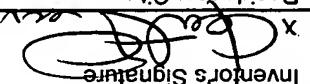
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		Given Name (first and middle (if any))		Family Name or Surname	
Mailing Address		Signature		Residence: City		Signature	
8549 Oakenshield Circle		Signature		Antelope		Signature	
Mailing Address		Residence: City		Antelope		Residence: City	
Signature X 		Melanie A.		Signature		Signature	
Mailing Address		Residence: City		Antelope		Residence: City	
8549 Oakenshield Circle		Signature		Signature		Signature	
Mailing Address		Residence: City		Antelope		Residence: City	
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DECLARATION

Supplemental Sheet

ADDITIONAL INVENTOR(S)

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PTO/SB/02A (09-04)

NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor
Given Name (first and middle [if any])				Family Name or Surname
Kent D.				Patent Date
Inventor's Signature 				Date 
Mailing Address				Residence: City Antelope County California USA
8549 Oakenshield Circle				City Antelope County California USA
City Antelope State California Zip 95843 Country USA				Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto. <input checked="" type="checkbox"/>

1 hereby declare that all statements made herein of my own knowledge are true and that all statements made on information I believe to be true, and further that these statements were made with the knowledge that what willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I, Robert M. Ashen, do hereby declare that the above named inventor has filed a petition for a patent in the United States Patent and Trademark Office, and further declare that the above named inventor is the sole inventor of the subject matter described in the application, and that the same is my original invention.

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DECLARATION — Utility or Design Patent Application

Name: Robert M. Ashen, Esq.

Address: 1737 Franklin Canyon Drive

City: Beverly Hills State: California ZIP: 90210

Country: USA Telephone: 310.274.8060 Email: rasher@pacbell.net

Direct all correspondence to: The address associated with Customer Number: _____
 Correspondence addressed below

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I hereby appoint:		Practitioner(s) named below:	
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<input checked="" type="checkbox"/> OR Firm or Individual Name Robert M. Ashen, Esq. <div style="border: 1px solid black; height: 40px; width: 100%;"></div>		<input checked="" type="checkbox"/> OR The address associated with the Customer Number: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
<input checked="" type="checkbox"/> OR Firm or Individual Name Law Offices of Robert M. Ashen 1737 Franklin Canyon Drive Beverly Hills, CA 90210 USA 310-274-8060 Email: rashed@pacbell.net		<input checked="" type="checkbox"/> OR I am the Applicant/Inventor. <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
<input checked="" type="checkbox"/> OR Signature <div style="border: 1px solid black; height: 40px; width: 100%;"></div>		<input checked="" type="checkbox"/> OR Statement under 37 CFR 3.7(b) is enclosed. (Form PTO/SB/96) Assignee of record of the entire interest. See 37 CFR 3.71. <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
SIGNATURE OF APPLICANT OR ASSIGNEE OF RECORD Signature <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			

POWER OF ATTORNEY		CORRESPONDENCE ADDRESS		INDICATION FORM	
Applicant/Client Number	Kent D. Pearson	Title	Multifield Multi-Table Game . . .	Attorney's Name	Examiner's Name
Filing Date		Art Unit		Attorney's Docket Number	PRSN-P0012
First Named Inventor		Patent No.			

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POWER OF ATTORNEY		CORRESPONDENCE ADDRESS	
and		INDICATION FORM	
Applicant Number	Filing Date	First Named Inventor	Kent D. Peatson
		Title	Moldfied Multi-table Game.
		Art Unit	
		Examiner Name	
		Attorney Docket Number	PRSN-POOL2

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